

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

Deborah King
59 Dexter Rd
R. Sartate, NY
03857

2. Article
(Trans.)

7004 0750 0000 5505 3634

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *Deborah King* Agent Addressee

B. Received by (Printed Name)

Deborah King C. Date of Delivery
3/21/05

D. Is delivery address different from item 1? Yes
If YES, enter delivery address below: No

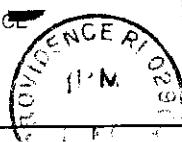
3. Service Type

<input checked="" type="checkbox"/> Certified Mail	<input type="checkbox"/> Express Mail
<input type="checkbox"/> Registered	<input type="checkbox"/> Return Receipt for Merchandise
<input type="checkbox"/> Insured Mail	<input type="checkbox"/> C.O.D.

4. Restricted Delivery? (Extra Fee)

 Yes

UNITED STATES POSTAL SERVICE



First-Class Mail
Postage & Fees Paid
USPS
Permit No. G-10

- Sender: Please print your name, address, and ZIP+4 in this box •

Christopher N. Souris
Krakow & Souris
225 Friend Street
Boston, MA 02114

